

State of Washington Application for a Water Right



For Ecology Use

Fee Paid 10

Date 10 | 18 | 01

CK#1020 Fm

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGA	NIZATION, OR WATER SYSTEM
Name #/K Haak II LLC	Home Tel: (<u>\$09</u>) <u>837</u> - <u>3140</u>
Mailing Address 2//3 Scoon Rd	
City Sunnyside Statelua Zip+4 989	44 + 9157 FAX: ()
Section 2. CONTACT - PERSON TO CALL Same as above	
Name Henry Haak	Home T Work T Morey is needed For the fee
Mailing Address	Work T Money is market
City State Zip+4	+ FA for application fee
Relationship to applicant <u>managing members</u>	
Section 3. STATEMENT OF INTENT	J hank you, Kasen Haas
The applicant requests a permit to use not more than	
Cubic feet per second) from a Surface water source or	ground water source (check only one) for the purpose(s)
DESCRIPTION OF THE PLACE OF USE. (See instruct	ions.) NOTE: A tax parcel number or a plat number is not
sufficient. See (A)	
Estimate a maximum annual quantity to be used in acre-foot	per year: ///
	oject. Indicate the period of time that the water will be needed:
From 6/10/100 12/3/1000	igs annually perday
Section 4. WATER SOURCE	
If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for well(s).
Number of diversions:	
Source flows into (name of body of water):	Size & denth of well(s):
	we 11 # 2 6" casing/210 ft deep
LOCATION Section 6	The state of the s
	com-the point of diversion or withdrawal to the nearest
section corner: Well #2 - Sw Corner of	rom the point of diversion or withdrawal to the nearest Section 6 (Independance + Washout Rd + 486 ft E on property.
2605 ft NonWashout Ka	+ 186 ge E on property.
	If location of source is platted, complete
1/4 of Section Township Range (E/V	
	Lot Block Subdivision
NW SW 6 10 23E	yakima
For Ecology Use Date Received: Prior	rity Date: YAKIMA
SEPA: Exempt/Not Exempt FERC License #	Dept. Of Health #
Date Accented As Complete By	Date Returned By WPIA

ECY 040-1-14 Rev. 7/97 * * f **APPLICATION**

Appl. No.: 64-34537

Sec	tion 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named:
В.	Briefly describe your proposed water system. (See instructions.) Used daily for dairy needs Well # 2 - 6" X 210 ft - 72 HP plump at 126 ft - can pump 100 gal per m
	72 HP pump at 126 ft - can pump 100 gal
	See (B) " a
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION.
Sec	See Cecology report # 2 - CJ 46/D 1 483 etion 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION completed for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.)
B.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your
Con	County Health Department. In plete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the
C.	Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
50-000000000000000000000000000000000000	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION ompleted for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated:
B.	List total number of acres for other specified agricultural uses:
	Use Acres Use Acres
	Use Acres
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.:
E.	Farm uses: Stockwater - Total # of animals
	Cleaning mulk parlor + equipment, cooling system, flush system for alley in loafing barns, etc. Drinking water for all animals,
٠,	miss dairy needs - APPLICATION

Section	8. WATE	D STO	PACE
SECTOR	O. AATT		MASKOIN

Will you be using a dam, dike, or other structure to retain or store water?

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.
Provide detailed driving instructions to the project site. Thing east on Yakima Valley Huy through Sunnyside, wa go to
The xx win sen at stop teget (18 th see) continue going
(becomes Washout Rd) 3 ½ miles to Independence Rd. Cross Independence
(becomes washow ha) 32 miles to 1 1 by long dairy on the right
going north approx's mile to the R+M Hack + Sons dairy on the right
The right into dreveway, continued to a culture
milk born of the 1 st home on the left. Well is located on the left
milk born & the 1 st home on the left. Well is located on the left between black top driveway & first house trailer.
Section 10. REQUIRED MAP

Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A.	Does the applicant own the land on which the water will be used?	X YES	□NO
	If no, explain the applicant's interest in the place of use and provide the name(s) and address(es	;)	
	of the owner(s):		
	(note for Info only - R+ m Haak + Sons lease the above	descre	bed
	Heak (16)		

B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

X YES	□NO
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I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Haak IL LLC pplicant (or/authorized representative) Landowner for place of use (if same as applicant, write "same")

We are returning your application for the following re	ason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested a	bove and return you	r application by

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice)

APPLICATION

Ecology is an Equal Opportunity and Affirmative Action employer.

or (360) 407-6006 (TDD).

Use this page to continue your answers to any questions on the application. Please indicate section number

before answer.